

EXHIBIT 76

1 UNITED STATES DISTRICT COURT
2 FOR THE NORTHERN DISTRICT OF OHIO
3 EASTERN DIVISION

4 IN RE: NATIONAL) MDL No. 2804
5 PRESCRIPTION OPIATE)
6 LITIGATION,) Case No.
7) 1:17-MD-2804
8)
9 THIS DOCUMENT RELATES TO) Hon. Dan A.
10 ALL CASES) Polster
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Thursday, December 13, 2018

HIGHLY CONFIDENTIAL - SUBJECT TO FURTHER
CONFIDENTIALITY REVIEW

Videotaped Deposition of JOLYNN
COLEMAN, held at 4206 South J.B. Hunt Drive,
Rogers, Arkansas, commencing at 8:15 a.m., on
the above date, before Debra A. Dibble,
Certified Court Reporter, Registered
Diplomate Reporter, Certified Realtime
Captioner, Certified Realtime Reporter and
Notary Public.

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877.370.DEPS | fax 917.591.5672
deps@golkow.com

1 other people in the same role?

2 A. That's kind of not -- can you
3 repeat what I'm --

4 Q. Sure. So let's imagine that we
5 had a car dealership. We passed a few of
6 them on the way in. You have five car
7 dealers all working at the GMC dealership
8 down the road. And each of the five dealers
9 works the whole year, and one of them sells
10 five times as many pickup trucks as everybody
11 else. That's the type of performance that
12 the owner of the dealership is going to know
13 about. They're going to say, "This person
14 sold a lot more trucks." And it's going to
15 be potentially reflected in their
16 evaluations. It might be reflected in the
17 form of a bonus. It might be something that
18 leads to advancement. Okay?

19 So I'm trying to understand, in
20 your role as a buyer, you described earlier
21 your job was to make sure that you supplied
22 the volume necessary to supply the stores and
23 meet the needs at the stores.

24 Do you recall we had that
25 conversation?

1 A. That's correct.

2 Q. And you also mentioned that
3 price was an important component. Not the
4 only component, but one of them; right?

5 A. Correct.

6 Q. And part of securing the best
7 price is the negotiation that you would
8 engage in with the supplier, whether that's a
9 manufacturer or a wholesaler.

10 A. Correct.

11 Q. Okay. Were your contract
12 negotiations or your purchases measured up
13 against others in the same role within
14 Walmart?

15 A. No.

16 Q. Okay. Who was your direct
17 supervisor when you became a pharmacy buyer
18 for Walmart?

19 A. Initially it was Frank Segrave.

20 Q. Changed over time?

21 A. Yes. Then it was Bruce
22 Painter. Then it was Sandy Kinsey.

23 Q. And when you became a senior
24 pharmacy buyer, was Sandy Kinsey still your
25 direct supervisor?

1 A. Yes.

2 Q. Anyone else?

3 A. No.

4 Q. Okay.

5 MR. ECKLUND: Let's take our
6 first break.

7 THE VIDEOGRAPHER: We are going
8 off the record at 9:25 a.m.

9 (Recess taken, 9:25 a.m. to
10 9:44 a.m.)

11 THE VIDEOGRAPHER: We are back
12 on the record at 9:44 a.m.

13 MR. ECKLUND: Welcome back,
14 Ms. Coleman.

15 THE WITNESS: Thank you.

16 Q. (BY MR. ECKLUND) Just a few
17 follow-up questions from this morning. You
18 mentioned in passing a mail pharmacy program.
19 Did you purchase for mail order?

20 A. Can you define what
21 specifically?

22 Q. Sure.

23 So did Walmart provide
24 prescriptions for individuals that only
25 arrived at a physical store or did they also

1 ship prescriptions to individuals at their
2 homes via mail?

3 A. We did have a mail order
4 pharmacy.

5 Q. When did the mail order
6 pharmacy begin?

7 A. I don't know the opening. I
8 was transferred to be the general manager of
9 that facility and was in that role there for
10 right at six years.

11 Q. Did the mail order pharmacy
12 program dispense controlled substances?

13 A. Yes.

14 Q. Do you recall any specific
15 controlled substances that were distributed
16 by the mail order program?

17 A. I don't recall specifically,
18 but we had controlled substances that were
19 dispensed.

20 Q. Were there any limitations in
21 the controlled substances that you would
22 dispense via mail?

23 MR. CARTER: Object to the
24 form.

25 Q. (BY MR. ECKLUND) For example,

1 any particular drug product? Oxymorphone,
2 hydromorphone, hydrocodone? Were all of
3 those available via mail program?

4 A. Yes.

5 Q. Were there limitations on how
6 many pills you might dispense? If the
7 prescribing physician had said, "You can have
8 50 pills," would you ship 50 pills via the
9 mail program?

10 MR. CARTER: Object to the
11 form.

12 THE WITNESS: We would follow
13 whatever the state allows for the
14 controlled substance and what the
15 physician has ordered.

16 Q. (BY MR. ECKLUND) All right.
17 You also mentioned that your title changed
18 from pharmacy buyer to senior pharmacy buyer.
19 Was that change prompted by strong
20 evaluations? Was it based on seniority? Do
21 you have an understanding of why your title
22 changed?

23 A. Other than performance, I don't
24 recall.

25 Q. Okay. Have you reviewed any of

1 the complaints filed in either state or
2 federal court that are included in the
3 multidistrict litigation?

4 A. No.

5 Q. And when I say "the
6 multidistrict litigation," I mean all of
7 those cases that are currently consolidated
8 and centralized before Judge Polster in
9 Cleveland, Ohio. So that's what I'm
10 referring to.

11 A. I have not.

12 Q. Are you familiar generally with
13 the defendants that are named in this case,
14 beyond Walmart?

15 A. No.

16 Q. Are you familiar with the
17 plaintiffs?

18 A. No.

19 Q. Do you know whether they're
20 individuals or public entities?

21 A. I do not.

22 Q. Can we agree that there is an
23 opioid epidemic in the United States today?

24 A. I believe there's a crisis, an
25 opioid crisis.

1 Q. What's the difference between
2 an opioid epidemic and an opioid crisis?

3 A. I'm not a -- someone who can
4 define what an epidemic is, but, you know, I
5 will say one way or the other.

6 Q. When did you become aware of
7 the opioid crisis?

8 A. Probably in the last five years
9 or so. Six years.

10 Q. How did you become aware of the
11 opioid crisis in 2012? Or 2013?

12 A. Just what's in the news or what
13 I hear being at the office.

14 Q. So at the office you have
15 discussions about the opioid crisis between
16 2012 and 2013?

17 A. I can't recall when.

18 Q. Do you have a recollection of
19 any of those discussions?

20 A. I don't recall specific
21 discussions around the opioid crisis.

22 Q. Would those have been formal
23 meetings or informal watercoolers?

24 A. Just informal.

25 Q. Just conversations around the

1 coffee pot or the watercooler around the
2 office?

3 A. I really don't recall where
4 they were.

5 Q. Do you recall having any
6 conversations with anyone in particular?

7 A. No.

8 Q. You mentioned news. Are you
9 talking about written news? Like a
10 newspaper? Online internet? Or television
11 news?

12 A. Either.

13 Q. Both?

14 A. Both.

15 Q. When you watch television news,
16 what channels do you most often watch?

17 A. I don't really specifically
18 watch any one over the other.

19 Q. So local news?

20 A. Yeah.

21 Q. CNN?

22 A. Possibly.

23 Q. Fox News?

24 A. Possibly.

25 Q. CNBC?

1 A. Yes.

2 Q. MSNBC?

3 A. I'm not --

4 Q. You're completely open to
5 whatever newscaster is on. You're open to
6 listening and paying attention --

7 A. I don't watch a lot of news
8 personally, but yeah.

9 Q. So television news is not a big
10 part of your life?

11 A. Correct.

12 Q. How about reading the
13 newspaper? Is it a habit?

14 A. No.

15 Q. What about reading online news?
16 Is that a habit?

17 A. Online news? No.
18 Occasionally.

19 Q. Once or twice a week?

20 A. Yes.

21 Q. But not daily?

22 A. Not daily.

23 Q. Okay. When you say "crisis,"
24 what do you mean by crisis?

25 A. Just that -- crisis is that

1 there's a -- just an opportunity with a
2 product, or -- I don't really know the
3 definition of a crisis, but ...

4 Q. That's okay. Let's see if we
5 can reach agreement.

6 So I looked up on
7 Merriam-Webster's Dictionary the word
8 "crisis."

9 And there are a few definitions
10 available. We've got definition of crisis A:
11 "The turning point for better or worse in an
12 acute disease or fever?"

13 And you can see it on the
14 screen now. Correct? Ms. Coleman, you can
15 see the Merriam-Webster's website on the
16 large screen in the room?

17 A. Yes.

18 Q. Okay. And you can see it says
19 "Merriam-Webster since 1828," and you can see
20 I looked up the word "crisis"?

21 A. Yes.

22 Q. And I'm going to read it. If I
23 misread it, just stop me.

24 Definition of crisis.

25 "The turning point for better

1 or worse in an acute disease or fever."

2 B: "a paroxysmal attack of
3 pain, distress, or disordered function."

4 C: "an emotionally significant
5 event or radical change of status in a
6 person's life." And then there's -- midlife
7 crisis is an example.

8 Following below, we have
9 definition 2, "the decisive moment, as in a
10 literary plot."

11 And 3A and 3B: "An unstable or
12 crucial time or state of affairs in which a
13 decisive change is impending, especially one
14 with the distinct possibility of a highly
15 undesirable outcome." Examples being a
16 financial crisis, or the nation's energy
17 crisis.

18 And then B: "a situation that
19 has reached a critical phase." The
20 environmental crisis, and the unemployment
21 crisis being examples.

22 When you used the word
23 "crisis," do any of those definitions fit
24 your understanding of the word "crisis" as
25 you were using it when we talked about the

1 opioid crisis?

2 A. Yes.

3 Q. Which one?

4 A. Several of them.

5 Q. Why don't you identify the ones
6 that do.

7 A. "A turning point for better or
8 worse."

9 Q. Okay. So --

10 A. "A decisive moment."

11 Q. 1A, 2. Okay.

12 What about 3A or 3B?

13 A. I would say both of them.

14 Q. Okay. So when you use the word
15 "crisis" today, I'm going to keep your
16 understanding of that word in mind; is that
17 fair?

18 A. That's fair.

19 Q. I want to make sure we have an
20 understanding of what each other -- of what
21 I'm saying to you and what you're saying to
22 me. And if there's a word that I used today
23 and you want me to look it up and you want a
24 dictionary --

25 A. Okay.

1 Q. -- totally fine. Okay?

2 Can we agree that over the past
3 year the opioid crisis has gained visibility
4 in our society?

5 A. Yes.

6 Q. Are you aware that
7 President Trump has identified the opioid
8 epidemic as he referred to it as a "public
9 health emergency"?

10 A. Yes.

11 Q. Do you agree with that
12 characterization by President Trump that the
13 opioid crisis or opioid epidemic is a "public
14 health emergency"?

15 A. I think it's a public health
16 concern, personally, my personal opinion.

17 Q. Okay. That's all right. You
18 don't have to agree or disagree with the
19 President. I'm just asking your opinion.

20 A. Yeah.

21 Q. Are you aware that a national
22 commission and a commission of state
23 governors have issued recommendations for
24 action to address the opioid epidemic?

25 A. I'm not aware of that.

1 Q. Are you aware that many of the
2 concerns that have been raised by elected
3 officials stem from the fact that in 2016,
4 more than 11 million Americans misused
5 prescription opioids?

6 MR. CARTER: Object to the
7 form.

8 MR. WATTS: Object to the form.

9 MR. ECKLUND: Are you aware?

10 THE WITNESS: Can you restate
11 that?

12 MR. ECKLUND: Sure.

13 Q. (BY MR. ECKLUND) Are you aware
14 that in 2016, more than 11 million Americans
15 misused prescription opioids?

16 MR. CARTER: Object to the
17 form.

18 THE WITNESS: I don't
19 specifically know that number.

20 Q. (BY MR. ECKLUND) Are you aware
21 that the number of opioid-related deaths have
22 more than quadrupled since 1999?

23 MR. CARTER: Object to the
24 form.

25 THE WITNESS: I don't know the

1 details on that.

2 Q. (BY MR. ECKLUND) It's not
3 something that you're aware of in your role
4 as a purchaser or buyer of pharmaceutical
5 drugs including prescription opioids for
6 Walmart?

7 MR. CARTER: Same objection.

8 THE WITNESS: I'm not aware of
9 the details of that, no.

10 MR. ECKLUND: Okay.

11 Q. (BY MR. ECKLUND) I'd like to
12 shift to some of the supply and demand
13 concerns for healthcare generally and
14 pharmaceuticals specifically because it's a
15 unique market. And I'd like to talk about
16 some of those unique elements of prescription
17 drugs. Okay? Can we do that?

18 A. Yes.

19 Q. Okay. Can we agree that buying
20 and selling for health and wellness and
21 prescription drugs in particular is different
22 than how other departments within Walmart
23 might operate? For example, let's use blue
24 jeans or a dozen eggs or a book.

25 A. I've never bought in other

1 areas of Walmart.

2 Q. Okay.

3 A. So I would --

4 Q. That's okay. We'll get there.

5 If I wanted to go into a store
6 today and buy 50 pills, prescription pills,
7 but I don't have a prescription, I can't do
8 it. Is that right? Without a prescription,
9 I can't purchase prescription drugs?

10 A. Correct.

11 Q. But I can go in and buy a dozen
12 eggs from Walmart if they're available for
13 sale?

14 A. Correct.

15 Q. And I could buy blue jeans?

16 A. Correct.

17 Q. Or a book?

18 A. Yes.

19 Q. Anything else in the store that
20 has restrictions that you're aware of?

21 A. Probably firearms.

22 Q. Firearms.

23 A. Alcohol.

24 Q. Okay. Does that make sense to
25 you? Firearms should be --

1 A. I don't have one way --

2 Q. No, I'm saying does it make
3 sense that firearms might be something where
4 there would be additional restrictions on
5 purchase and sales?

6 A. Yes.

7 Q. Anything besides firearms and
8 prescription drugs come to mind?

9 A. Alcohol.

10 Q. Alcohol. Does that one make
11 sense to you as well?

12 A. I don't -- I just know there
13 are restrictions as a purchaser.

14 Q. Okay.

15 A. That's really all I have to add
16 there.

17 Q. And tobacco as well?

18 A. Yes.

19 Q. Okay. Now, you mentioned
20 firearms, alcohol, and I mentioned tobacco to
21 you.

22 So let's talk about those, and
23 then we'll talk about prescription drugs.

24 Most individuals who purchase
25 alcohol purchase alcohol to consume the

1 alcohol because they enjoy the alcohol. Is
2 that basically consistent with your
3 understanding of why people might buy
4 alcohol?

5 A. I don't know why people buy
6 alcohol. I don't know. I mean ...

7 MR. CARTER: I didn't have the
8 time at the break, but I would object
9 to the form of that question.

10 MR. ECKLUND: That's fine.

11 Q. (BY MR. ECKLUND) Tobacco, most
12 people purchase it for personal use. They
13 enjoy smoking tobacco. They enjoy chewing
14 tobacco. Maybe they're addicted, but they
15 use tobacco themselves?

16 MR. CARTER: Same objection.

17 Q. (BY MR. ECKLUND) What's your
18 understanding of why people purchase
19 prescription drugs? You're a pharmacist.
20 Why do people most often buy prescription
21 drugs? Is it because they like ingesting
22 pills or is it because they're looking for a
23 health benefit?

24 A. They likely have a diagnosed
25 health condition and are seeking treatment of

1 that condition.

2 Q. Okay. So they're looking to
3 treat a health condition. They're looking to
4 improve their quality of life?

5 MR. CARTER: Object to the
6 form.

7 THE WITNESS: Possibly.

8 Q. (BY MR. ECKLUND) Possibly?
9 Perhaps a little longer life? Maintain or
10 manage a condition so that you can live a
11 full and complete life?

12 MR. CARTER: Form.

13 THE WITNESS: Possibly.

14 Q. (BY MR. ECKLUND) Possibly?

15 So consumers purchase and
16 ingest pharmaceuticals most often because of
17 the role they can play in improving or
18 maintaining their health. Is that fair?

19 A. Yes.

20 Q. Okay. In your role as a
21 pharmacy buyer for Walmart, did you also
22 purchase over-the-counter drugs?

23 A. I did purchase a small part of
24 over-the-counter; the dosing spoons and
25 things like that.

1 Q. Okay.

2 A. For a small period of time.

3 Q. Anything beyond dosing spoons?

4 A. I did have the blood pressure,
5 diabetes -- the section of devices for a
6 short period of time.

7 Q. You said "blood pressure,
8 diabetes." Do you mean blood pressure --

9 A. Blood pressure monitors.

10 Q. -- monitors. And then
11 diabetes. Blood sugar testing devices?

12 A. Yes.

13 MR. CARTER: You've done a
14 pretty good job, but try not to talk
15 over each other.

16 THE WITNESS: Sorry.

17 MR. CARTER: So let him finish
18 and then you can --

19 THE WITNESS: Okay.

20 Q. (BY MR. ECKLUND) That's okay.
21 We're doing well, and we'll keep trying.

22 So when you're talking about
23 blood sugar testing devices, you're talking
24 about test strips, needles that diabetics may
25 need to use to get a drop of blood so they